



Town of Amherst
Public Meeting
Agenda

Date: **Wednesday, July 29, 2020**
Time: **6:00 pm**
Location: **Zoom Virtual Meeting**

	Pages
1. Welcome	
2. Deputy CAO Presentation	1 - 2
3. Public Presentations	3 - 3
4. Written Submissions	4 - 20
5. Adjournment	21 - 21

Welcome to tonight's meeting- We are here to provide information on the request by the SOAR Community Health Board to add fluoride to the Town's municipal water supply.

I am Jason MacDonald, Deputy CAO for the Town of Amherst.

First I would like to take this opportunity to acknowledge the land the meeting is being held on is the traditional unceded territory of the Mi'kmaw People.

Itinerary for tonight will be as follows:

1. I will provide information on the background to how we have come to today's meeting, the logistics of the plebiscite, the potential costs to adding fluoride to the water system and some legislative requirements.

As this meeting is intended to obtain public input, and Council has not yet made up their mind on the issue, I will not discuss the pro / cons of adding fluoride to the water system, as it is our intention to encourage each resident to educate themselves on this highly personal matter.

2. We will then allow members of the public who have pre-registered to make their presentations.
3. Written submission will be available in the itinerary package available on the Town of Amherst Website tomorrow.
4. After the public presentations the meeting will adjourn.

In the Fall of 2018 SOAR made a presentation to Council regarding the benefits of adding fluoride to the municipal water supply. As this is not a Council led initiative, and Council has not yet made a decision on this issue, I will not share the details of that presentation during this meeting. However the SOAR group will have an opportunity to speak later on as they have pre-registered.

Since the original SOAR request, Council set out to understand the issue and has received a number of reports from Staff on the topic.

These reports generally dealt with logistical issues, including financial implications, technical requirements and existing legislation.

Also discussed was the experience of other municipal units as they considered such requests. This information led Council to decide that as this was a very personal topic for many people that they would not make any decision without seeking substantial public input.

After much discussion Council determined that the best way to obtain public input from all those impacted would be to hold a plebiscite during the upcoming October Municipal Election. Customers of the Utility who reside in the County of Cumberland will be able to provide input by answering the same question in a survey to be distributed to them in the upcoming quarterly water bills.

I want to make it very clear that this plebiscite is non-binding. Council will use the results of the plebiscite (as well as the survey of County Customers) to help them understand the opinions of the citizens of Amherst and all water utility users when they make their decision.

With regard to logistics, fluoridation of the water supply is not regulated by the Utility and Review Board. Every water utility in the province can make their own decision in this regard. If a Water Utility does decide to fluoridate, the Nova Scotia Department of Environment will regulate fluoride levels and monitoring. For reference, some municipalities in Nova Scotia do fluoridate, while others do not. It is my understanding at this time that municipalities such as HRM, New Glasgow and CBRM do add fluoride to the water, while units such as Truro, Windsor and Antigonish do not.

With regard to cost, there is a one time capital investment of approximately \$60,000 with an annual cost of approximately \$25,000. The quarterly cost to a water utility customer would likely be in the area of \$2.00.

Because there can be very strong opinions on this issue and it is a public health initiative brought forth by the local community health board, Council is looking for the opinion of the water consumers. As such we are not providing information on the pros and cons, rather we are encouraging you to educate yourselves on the matter prior to making a decision during the plebiscite held in October. The question on the plebiscite (or survey for County Residents) is simply, "Should the Town of Amherst Fluoridate the municipal drinking water supply? Yes or no?"

There is no date set for a final decision to be made on this issue. It will be made subsequent to the information obtained in the survey and the October Plebiscite.

With regard to public presentations at this meeting, members of the public were advised that pre-registration was required and there was a two minute time limit on all presentations. We have had only one pre-registration. So I will now call on Dr. Ryan Sommers to make his statement.

Transcription of a video submission by Dr. Janneke Gradstein for the public meeting on water
Fluoridation held by the Town of Amherst on July 29, 2020 at 6:00pm

July 29, 2020

Hi, I am Janneke Gradstein. I am a family physician in Amherst, Nova Scotia. I've lived here for many years. It was only actually fairly recently that I learned that we didn't have a fluoride program in Amherst. It was at a dentist appointment and my dentist made the comment to me that I must have grown up in a place with a fluoride treatment program because my teeth were in such great shape. That alarmed me. I spoke to a few of my colleagues and to see if they were aware, and they agreed with me that that certainly explained what we see in the ER and in our family practices. So, we look in a lot of mouths obviously and we see a lot of rotten teeth. We see many people with chronic health problems related to inflammation in their mouths and obviously many people also don't have the funds to deal with those problems when they arise. They don't have dental coverage, or they don't have the finances to pay for fillings, or dentures, etc. Fluoridation works very well. It is a simple program that municipalities can use to adjust the fluoride in their water. Fluoride occurs naturally in the water and in food. And many places such as many people on wells, have enough fluoride in their water that it prevents tooth decay. Municipalities, cities often don't have enough fluoride in water and when those programs are introduced to adjust the levels of fluoride, we see dramatic decreases in cavities in the population. Many more children grow up without any cavities. This is a program that has been used for almost a century. It is used around the world in cities, and towns, and its high time that Amherst consider doing the same.

Natalie LeBlanc

From: CDHNS Registrar [REDACTED]
Sent: July 27, 2020 4:37 PM
To: Natalie LeBlanc
Subject: Community Water Fluoridation Plebiscite: Position Statement of the College of Dental Hygienists of NS (CDHNS)

Importance: High

Hello,

We have been informed that the town of Amherst will be holding a community plebiscite on water fluoridation. Thank you for inviting organizations and individuals to respond.

The College of Dental Hygienists of Nova Scotia (CDHNS) is the regulatory body for dental hygienists in Nova Scotia.

Vision

The College of Dental Hygienists of Nova Scotia, operating in the best interest of the public, is a self-sustaining regulatory authority whose members are recognized by the public as essential health care providers. The College supports an environment of interprofessional collaboration, professional advancement, and equitable access to health care for all Nova Scotians.

Please see that link below regarding the CDHNS's position state on fluoridation, including community water fluoridation.

https://cdhns.ca/images/2020/CDHNS_2019_Position_on_Use_of_Fluoride_in_Caries_Prevention.pdf

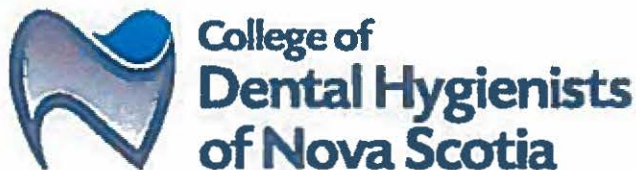
Please don't hesitate to contact me directly if you have any further questions.

Warm regards,

Stacy Bryan, RDH, Dip DH, MA Lead

Registrar, CDHNS
11-2625 Joseph Howe Drive
Halifax, NS B3L 4G4
Ph: 902-444-7241

(Please note: Since all CDHNS staff is working remotely during this pandemic, the phone and fax lines are monitored sporadically. Please use email for a more timely response.) Need further details about CDHNS Staff working remotely? Please see the [Contact page](#) on our website.
www.cdhns.ca





College of
Dental Hygienists
of Nova Scotia

11-2625 Joseph Howe Drive
Halifax, NS
B3L 4G4

T. 902.444.7241
F. 902.444.7242
www.cdhns.ca

CDHNS POSITION ON USE OF FLUORIDE IN CARIES PREVENTION

Background: Dental caries (tooth decay) is the most common disease among children, and remains a significant oral health problem worldwide for both children and adults. Fluoride is a natural element found in soil, water, and various foods. Fluoride protects against tooth decay.

Position: After careful review of existing position statements and research on use of fluoride in caries prevention, including use of water fluoridation, the Council of the College of Dental Hygienists of Nova Scotia (CDHNS) has determined that it will adopt the Canadian Dental Association (CDA's) current position statement on use of fluoride in caries prevention (revised 2012) as the CDHNS position statement on use of fluoride in caries prevention. *It is noted that this CDA position was currently under review when this decision was made. When/if it is revised, it will be reviewed by the CDHNS to see if the policy will continue to be adopted by the CDHNS.*

Adopted by the CDHNS Council January 18, 2019

Natalie LeBlanc

From: Dowe, Colleen [REDACTED]
Sent: July 27, 2020 3:54 PM
To: Natalie LeBlanc
Subject: Plebiscite submission SOAR CHB
Attachments: Plebiscite submission July 2020.docx

Hello Natalie,
Attached is a submission with regard to the fluoride plebiscite on behalf of the SOAR Community Health Board.
Please let me know if you need any further information.

Thank you!
Colleen



Colleen Dowe
Community Health Board Coordinator
Cumberland County
34 Prince Arthur St.,
Amherst NS B4H 1V6
Cellular: 902 397-0376
colleen.dowe@nshealth.ca
www.nshealth.ca

July 27, 2020

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We know:

- Low income families receive less oral health care than the general population;
- Early Childhood Caries (ECC) is the most common chronic disease in childhood - five times more common than asthma;
- ECC can be painful and affect a child's ability to eat, sleep, socialize and concentrate;
- In Canada, oral health disease accounts for 2.26 million lost school days per year and 4.15 million lost working days for adults;
- Poor oral health can limit the ability to learn and limit job opportunities.

We also know that fluoride has proven beneficial to oral health and providing fluoride through municipal water systems is the most effective way to reduce ECC. A recent study indicates that since fluoride was removed from the Calgary water system there has been a demonstrated increase in ECC. <https://onlinelibrary.wiley.com/doi/abs/10.1111/cdoe.12215>

Colleen Dowe
Community Health Board Coordinator, Cumberland County

On behalf of the Springhill, Oxford, Amherst & Region (SOAR) Community Health Board

Natalie LeBlanc

From: Heather Dymont [REDACTED]
Sent: July 29, 2020 1:12 PM
To: Steve Jennex; Benjamin Davis
Cc: Natalie LeBlanc
Subject: Letter in Support of Water Fluoridation in the Town of Amherst - July 29, 2020
Attachments: IWK Dentistry Amherst Fluoride July 2020.pdf



Department of
Dentistry
5850/5980 University
PO Box 9700
Halifax, B3K 6R8
Canada

Dr. Ryan Sommer
Medical Officer of Health
Amherst, Nova Scotia

July 29, 2020

Dear Dr. Sommer,

I was very happy to hear that the Town of Amherst is considering water fluoridation. As the Chief of Dentistry at the IWK Health Centre, I could not be more pleased to support this initiative and add my perspective to the conversation.

Water fluoridation is a key element in our “fight” against dental disease. In fact, the **most common chronic disease of children is dental caries**. At the IWK Health Centre and other pediatric hospitals across Canada, **approximately one third of the total time used for day surgery procedures is for dental work for children**. This is a truly shocking statistic.

Presently at the IWK, we have over **800 children waiting for dental surgery**. Some of these children will wait over a year for a consultation and then another year until they are able to have their required treatment. Untreated dental disease can cause **pain and serious infection**. We see many children presenting to their dentist’s office or to hospital emergency room with very urgent dental treatment needs.

Preventing dental caries is the key to getting this waiting list, and this disease, under better control in Nova Scotia. Water fluoridation plays a major role in the prevention of this disease and is particularly important for the protection of the **most vulnerable members of our population, including children living in poverty**. The World Health Organization and all other major reputable national dental and medical organizations support water fluoridation. There has been a great deal of advocacy work done in this area and I am happy to see that there is an initiative to bring water fluoridation to another part of Nova Scotia.

Dr. Ryan Sommer
Medical Office of Health, Amherst, NS
July 28, 2020

Page 2

It is a true pleasure for me to offer my full and unqualified support for this initiative in the Town of Amherst.

Sincerely,



Heather Dymont
Chief, Department of Dentistry, IWK Health Centre
Head, Division of Pediatric Dentistry, Dalhousie University

cc.

Dr. Doug Sinclair, VP Medicine, IWK Health Centre
Mr. Steve Jennex, Executive Director, Nova Scotia Dental Association
Dr. Ben Davis, Dean, Faculty of Dentistry, Dalhousie University

I did not realize that Amherst does not adjust the fluoride in the municipal water supply when we moved here. It was only several years later, when my dentist commented on that I must have grown up in an area with fluoridated water (I have good teeth), that I learned that we don't have that here. I enquired about this, as some areas don't need to fluoridate their water because the fluoride occurs naturally in those areas. People on well water, for example, are more likely to have enough fluoride in the water to protect against cavities. I was told that the reason for Amherst not having fluoridation program was that some people were concerned about the health effects of fluoride.

It is very important to note that fluoride occurs naturally in ground water, as well as many foods, but is often very low in municipal water supplies. Towns monitor fluoride in the water, as very high levels can lead to discoloration of teeth. However normal levels of fluoride lead to stronger bone and tooth formation. For teeth specifically, studies show that when you introduce fluoridation to a municipal water supply, children are far more likely to grow up without cavities.

I work in family practice and in our Amherst emergency department. I look in a lot of mouths and I can tell you that what I see is often not pretty. There are many children and adults whose mouths are full of rotten teeth. This impacts the whole body, because of chronic inflammation and infection, as well as limiting what they can eat. Many of the people affected cannot afford proper dental care.

In short, municipal fluoridation programs of fluoride-poor water supplies do work to prevent tooth decay, and they work well. Fluoridation is a simple, effective intervention which has been used widely in cities and towns around the whole world, for almost a century, to ensure that municipal water supplies have normal levels of fluoride. It is high time for Amherst to do the same.

Natalie LeBlanc

From: Stevens, Catherine L <[REDACTED]>
Sent: July 29, 2020 11:54 AM
To: Natalie LeBlanc
Subject: Letter of Support - community water fluoridation in the Town of Amherst.
Attachments: 20200729 letter of support Community Flouridation Amherst.pdf

Sent on behalf of Dr. Robert Strang and Dr. Ferne Kraglund

Hello:

Please find attached our letter of support on community water fluoridation in the Town of Amherst.

Thank you

Please confirm receipt of this email.

July 29, 2020

Dear Mayor and Council:

We are thrilled to submit this letter outlining our support for the implementation of community water fluoridation in the Town of Amherst. Along with other important public health interventions such as vaccinations, tobacco control, and seat belt laws, community water fluoridation is considered one of the top ten public health actions of the 20th century. It is a proven, safe, cost-effective, and equitable means of improving and protecting the dental health of populations.

A few points that articulate why we strongly support this initiative include:

- Oral health is essential to overall health and well-being at every stage of life. A healthy mouth allows a person to eat, speak and socialize without discomfort or embarrassment.
- Tooth decay is the most common chronic condition of childhood. It can lead to unnecessary pain or suffering, infection, tooth loss or costly restorative treatment.
- Populations that experience the most tooth decay are also those who have the greatest difficulty accessing oral health care.
- The weight of research evidence clearly demonstrates that water fluoridation remains a safe, protective, preventative measure to improve oral health and reduce tooth decay for everyone.

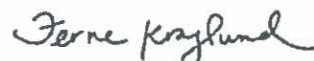
As public health doctors and dentists, we applaud Mayor, Council, staff and residents for engaging in dialogue around this important public policy issue. It is an incredible opportunity to increase the number of Nova Scotians who have access to water fluoridation. Currently, 76% of Nova Scotians on municipal water supplies receive the benefit of fluoridated water.

We would like to close with a recommendation as we begin this public conversation. We encourage residents to engage in thoughtful debate and discussions on this issue. It is important for residents to review the literature and evidence on this subject using careful critical thinking skills. This means exploring and understanding where the information came from, how the research was conducted, and what conflicts of interest the authors might have. We would be happy to provide a list of relevant research and articles on community water fluoridation so that residents can make an informed decision when they vote in October.

Yours sincerely,



Robert Strang, MD, MHSc., FRCPC
Chief Medical Officer of Health
Department of Health and Wellness



Dr. Ferne Kraglund
Assistant Dean for Student Affairs
Faculty of Dentistry, Dalhousie University

Natalie LeBlanc

From: Kerri Smith [REDACTED]
Sent: July 26, 2020 4:35 PM
To: Natalie LeBlanc
Subject: Fluoride

Hi Natalie!

I'm am writing this email to express my feelings on adding fluoride to our water supply. I'm sure you will have many stories and I don't want to take time from the most important ones. I do express my choice to NOT have fluoride added. I'm only hoping I'm one of many. Thank you for hearing me. You are appreciated.

Sincere regards,
Kerri LeBlanc-Smith

Sent from my iPhone

Natalie LeBlanc

From: EL Childs. [REDACTED]
Sent: July 28, 2020 5:17 PM
To: Natalie LeBlanc
Subject: Submission for consideration at Fluoride in the water meeting July 29

Fluoride in Amherst's water is neither necessary nor reasonable.

The ethical arguments against fluoridation of our potable water is strong. Fluoridation of drinking water supplies infringes on the rights of Amherst residents to choose the chemicals they ingest. Studies show that the greatest benefits of fluoride are to children's dental health and yet all Of us will be exposed to it. How many children will benefit? What will be the cost of delivering this chemical to a small percentage of the population?

Studies show that less than 5% of the water flowing through water systems is actually consumed by the population. The rest goes down the drain as sewage, lawn watering, and laundry water. That's going to be a lot of money for a very small amount of benefit. This is especially true as studies show that fluoride is most effective when applied topically to children's teeth by dental technicians. not by ingesting it.

What controls will be in place to ensure fluoride levels Delivered are always within recommended doses are within safe Levels. Some people drink more water than others thus ingesting larger quantities. This is the second ethical issue.

Surprisingly, we are considering an action over which there seems to be absolutely no controls Over the doses of fluoride administered to people, or the frequency of these doses. When the chemical is administered via water supply, the dose is directly related to the amount of water consumed. Infants on formula would ingest proportionally more fluoridated water than adults. Those who hydrate with water also will ingest more than others.

A CBC report online speaks strongly to this issue. Many communities have chosen to remove fluoride from their water.

Putting a toxic chemical like fluoride not ethical. It's not safe. Fluoridation does not deliver the human benefits the amount of money it will take Provide it annually. Wouldn't those scarce municipal dollars be better spent ensuring All children In ?Amherst have enough to eat.

Please do not implement this proposal to add fluoride to our water.

Ed Childs
Leslie Childs

Natalie LeBlanc

From: bradleyharrison [REDACTED]
Sent: July 26, 2020 2:57 PM
To: Natalie LeBlanc
Subject: upcoming plebiscite - Town of Amherst fluoridating the municipal water supply.

I would like to submit this letter from Dr. Hardy Limeback, BSc, PhD, DDS. Professor Emeritus and former Head, Preventive Dentistry at the University of Toronto.

I'm the former head of Preventive Dentistry at the University of Toronto. In addition to being a practicing dentist, I am a basic dental researcher/biochemist who has spent decades studying the effects of fluoride on teeth and bones. I was one of 12 scientists in North America chosen to serve on the National Academy of Science's committee that produced the 2006 report Fluoride in Drinking Water. Taking three years to complete, it's considered the most comprehensive work ever done on the toxicity of fluoride. Our report has been online for more than ten years here

<https://www.nap.edu/catalog/11571/fluoride-in-drinking-water-a-scientific-review-of-epas-standards>)

I was trained in traditional dentistry and for many years accepted the prevailing opinion of the dental/medical establishment in Canada and the U.S. that water fluoridation is 'safe and effective. It became clear to me that even at low chronic daily intakes of fluoride, such as those provided by fluoridation, susceptible and vulnerable groups of the population can experience ill health effects. Our own research showed that

1. fluoride from water fluoridation accumulates in bone in adults to undesirably high levels (levels at which the bone is at risk of fracture)
2. fluoride intake at low daily doses changes tooth dentin,
3. fluoridation causes dental fluorosis in children, especially those who are fed infant formula made with fluoridated water.
4. dental fluorosis is irreversible damage to the teeth the moderate level of which is aesthetically objectionable and undesirable. It costs families untold amount of extra dental expenses to treat the objectionable fluorosis, which many studies have recently shown has increased to at least 1 in every 10th child in the US in fluoridated areas. Dental fluorosis is a sign that fluoride at low daily intakes has harmed not only the teeth but also all the tissues that are susceptible to its effects: it has now been found to be associated with lowered IQ.5, 6 Harvard University's Anna Choi's analysis of the fluoride and lowered IQ literature clearly implies that precautionary steps should be taken before the developing brains of any more newborn babies and young children are unnecessarily exposed to too much daily fluoride intake. In addition, Table 8-2 of our NRC report identified endocrine injury at a small fraction of the dose a bottle fed infant receives.

Here are some facts relative to letters of support sent to Harvard Magazine.

1. There has never been a level 1 quality study to show fluoridation works, especially today with widespread use of consumer products containing fluoride and fluoride provided professionally. As many of your readers would know Level I evidence is a Randomized Clinical Trial (a prospective, double blinded, randomized and placebo controlled clinical study), the same that is required for any drug to get approved by the FDA. It has been stated that an RCT for fluoridation on an individual basis cannot be conducted. This is untrue. I have proposed one for Alaska where all fresh water (including drinking water) is trucked into the small communities.

2. The Cochrane reviewers, failing to find any RCTs, settled for the much weaker, uncontrolled non-randomized before and after studies. Those studies were not double blinded and they were recognized for their high risk of bias because adjustments were not made to control for the many confounding factors that affect caries rates.
3. There have been claims that European countries provide alternative fluoride delivery systems such as adding fluoride to milk and salt. Only a small percentage of the European population has used these sources of fluoride, and a handful of countries. Furthermore, studies trying to show the effectiveness of fluoridated salt or milk have had the same problems as the water fluoridation studies. There has never been a properly conducted RCT to show that these alternative delivery systems are effective (you can reference recent Cochrane reviews of F milk and F salt).
4. One of the letters quoted our report saying, "The NRC report (2007) found that in the United States, the prevalence of severe dental fluorosis is "very low (near zero) at fluoride concentrations below 2 mg/litre." This is nearly three times the standardised fluoride concentration used in US fluoridation schemes." If one reads our report in its entirety, one would see another graph showing that severe fluorosis does occur below 2 ppm in communities where people have nutritional deficiencies. The 2 ppm fluoride in drinking water cut-off was obtained from US studies involving only healthy children. Nutritional deficiencies most certainly occur in the US. That is why the recent NHANES oral health survey found an increase in dental fluorosis in US children from previous years as more and more communities in the US adopted fluoridation.
5. It is often claimed that fluoridation results in very low exposure to humans at levels much lower than the studies that show harm. However, fluoridation at 0.7 ppm or 1 ppm is a concentration, not a dose. Drinking 1 L of fluoridated drinking water per day results in a daily dose of 0.7 to 1.0 mg/day. The weight of the subject is crucial. Thus, newborns weighing 5 kg that drink formula made with fluoridated water are exposed to a daily dose of 0.14 to 0.20 mg/kg. This level of exposure causes dental fluorosis. As stated above, dental fluorosis is linked to lowered IQ. Furthermore, fluoride accumulates in bone throughout life. No study has yet determined the lifelong effect of fluoride accumulation in the bone on the immune system (derived from bone) or on the structural integrity of bone. It is disingenuous to claim that fluoridation is safe when its safety in the elderly exposed for an entire lifetime has never been tested.

References:

1. Chachra D, Limeback H, Willett TL, Grynblas MD. The long-term effects of water fluoridation on the human skeleton. *J Dent Res.* 2010 Nov;89(11):1219-23.
2. Vieira AP, Hancock R, Dumitriu M, Limeback H, Grynblas MD. Fluoride's effect on human dentin ultrasound velocity (elastic modulus) and tubule size. *Eur J Oral Sci.* 2006 Feb;114(1):83-8.
3. Brothwell D, Limeback H. Breastfeeding is protective against dental fluorosis in a nonfluoridated rural area of Ontario, Canada. *J Hum Lact.* 2003 Nov;19(4):386-90.
4. Limeback H, Vieira AP, Lawrence H. Improving esthetically objectionable human enamel fluorosis with a simple microabrasion technique. *Eur J Oral Sci.* 2006 May;114 Suppl 1:123-6; discussion 127-9, 380.
5. Tang QQ, Du J, Ma HH, Jiang SJ, Zhou XJ. Fluoride and children's intelligence: a meta-analysis. *Biol Trace Elem Res.* 2008 Winter;126(1-3):115-20.
6. Ding Y, Yanhui Gao, Sun H, Han H, Wang W, Ji X, Liu X, Sun D. The relationships between low levels of urine fluoride on children's intelligence, dental fluorosis in endemic fluorosis areas in Hulunbuir, Inner Mongolia, China. *J Hazard Mater.* 2011 Feb 28;186(2-3):1942-6.
7. Choi AL, Sun G, Zhang Y, Grandjean P. Developmental fluoride neurotoxicity: a systematic review and meta-analysis. *Environ Health Perspect.* 2012 Oct;120(10):1362-8.

Sincerely

Dr. Hardy Limeback, BSc, PhD, DDS
 Professor Emeritus and former Head, Preventive Dentistry
 Faculty of Dentistry, University of Toronto

Natalie LeBlanc

From: L Heisler [REDACTED]
Sent: July 29, 2020 1:50 PM
To: Natalie LeBlanc
Subject: Do not add fluoride

Good day.

I am voicing my concerns in regards to the idea of adding fluoride to the town water of Amherst. It does not benefit anyone and in fact, is detrimental to human health.

Having lived in places that do have it in their water, I can confirm that there are negative health effects. Even now, I return to visit those places, the water causes skin rashes when I shower in it. That is something that is visible but there are many negative health issues it causes that are unseen as well.

All one needs to do is go to places with fluoride in the water supply, run a glass of tap water. Right away the odor and taste should be enough to prove my point. Have you tried that lately?

It is deeply concerning that this is even being considered when there is so much research to show the issues it causes to human health and reasons NOT to add it to the water. It is NOT necessary to add it to our drinking water to prevent cavities! That is a very outdated idea and again there is much research to prove that as well. I suggest referring to the Harvard studies for one but honestly, the public shouldn't have to be spending their time during a pandemic telling our representatives not to poison our drinking water with fluoride.

I honestly wonder what town council has to gain by wanting to make people sick with overdoses of fluoride. This town has potential and being a town in Nova Scotia, we should be wanting to attract more people and grow the community (a healthy, thriving community). We want more doctors and health care professionals and need to make this town a safe and healthy place that they want to live. I would hope that you want to attract people who are intelligent, educated and aware. People consider the water quality before purchasing a home. They will consider fluoride a hard no when making that decision.

I can presently drink the tap water in Amherst and I truly hope you don't make a regretful decision by ruining it with added fluoride.

Respectfully,
Lynn Heisler DAC RAC
Amherst, NS

Natalie LeBlanc

From: Diana Legere, [REDACTED]
Sent: July 29, 2020 9:17 AM
To: Natalie LeBlanc
Subject: NO to flouride

NO to adding flouride to our drinking water
Dental care is free for children up to 14 years of age...there is no reason to add this toxic poison to our drinking water
Thanks for your time and the opportunity to say NO to flouride...
Signed Diana Legere
11 Mill St
Amherst, NS
B4H 2P6

Natalie LeBlanc

From: jolene.robitza [REDACTED]
Sent: July 26, 2020 12:09 PM
To: Natalie LeBlanc
Subject: Fluoride

No they shouldn't be putting fluoride in the water. There is people that are naturalist that have rid this stuff from their life with fluoride free toothpaste. If you look at kid's toothpaste it is fluoride free not recommended for kids under 5. Introducing an unnecessary chemical to our water and people's body is not a decision that any government should even be considering. Even the chlorine that we need to make water safe leaves some buying bottled water so no we don't need anymore chemicals in our water as fluoride services no purpose to our body besides strengthening teeth.

Yes i am aware that the town did this back when my husband was a kid and he does have stronger teeth today but back then we didn't know all we do now about chemicals that while small amount are safe an accumulation in the body can have poisoning effects that take a long time to show.

From a financial perspective why would the town want to add that extra cost to buying fluoride chemicals when it offers nothing in financial reward for you to do so? Why this has even been purposed when the town stopped doing it a long time ago I don't understand.

20 park st
Norm and jolene robitza

Sent from my Samsung Galaxy smartphone.

Deputy CAO Closing Notes

Thank you Dr. Sommers.

At this time, we will call the meeting to a close. But before I do, I would again like to reiterate that this issue has been initiated by the SOAR Community Health Board. Council has not yet made a decision and recognizes the deeply personal opinions held by some citizens on this topic. Council is therefore truly encouraging everyone to educate themselves on this issue prior to the plebiscite being held during the upcoming municipal election in October. Council will utilize the information provided in the plebiscite and survey to aid in their decision making on this topic.

The itinerary of this meeting, including all written statements will be available tomorrow on the Town of Amherst Website.

I hope everyone has a great evening and thank you for attending tonight.